

ITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Gregory D. PLOWMAN et al.

Title:

DIAGNOSIS AND TREATMENT

OF ALK-7 RELATED

DISORDERS

Appl. No.:

10/849,518

Filing Date: 05/20/2004

Examiner:

Unassigned

Art Unit:

Unassigned

AMENDMENT TRANSMITTAL

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee required for additional claims is calculated below: [X]

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	7	-	20	=	0	x	\$50.00	=	\$0.00
Independent Claims:	1	-	3	=	0	x	\$200.00	=	\$0.00
First p	resentation	of a	ny Multiple I	Deper	ndent Claims:	+	\$360.00	=	\$0.00
					CLAIMS	FEI	E TOTAL	=	\$0.00

Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

on for response filed within the first month: \$120.00 \$0.
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on for response filed within the second month: \$450.00 \$0.
on for response filed within the third month: \$1,020.00 \$0.
on for response filed within the fourth month: \$1,590.00 \$0.
on for response filed within the fifth month: \$2,160.00 \$0.
EXTENSION FEE TOTAL: \$0.
ry Disclaimer Fee under 37 C.F.R. 1.20(d): \$130.00 \$0.
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL: \$0.
Small Entity Fees Apply (subtract ½ of above): \$0.
TOTAL FEE: \$0.

The Commissioner is hereby authorized to charge any additional fees which may be [X] required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

FOLEY & LARDNER LLP

Customer Number: 22428

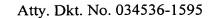
Telephone: Facsimile:

(202) 672-5475 (202) 672-5399 Respectfully submitted,

Beth A. Burrous

Attorney for Applicant

Registration No. 35,087





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Examiner:

Yao, Lei

Art Unit:

1642

AMENDMENT AND REPLY UNDER 37 C.F.R. § 1.111

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

This is a response to the non-final office action dated June 6, 2005 concerning the captioned patent application.

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this document.

Remarks/Arguments begin on page 4 of this document.

Please amend the application as follows.